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94518 7990 02/17/2011

DLA PIPER LLP (US)  
2000 UNIVERSITY AVENUE  
EAST PALO ALTO, CA 94303

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Via Electronic Filing / Timothy W. Lohse	(Depositor's name)
/Timothy W. Lohse/	(Signature)
May 17, 2011	(Date)

APPLICATION NO.	FILING DATE	FIRST NAME/INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/363,849	01/05/2006	Gerard De Haan	348162-982690	3974

TITLE OF INVENTION: MOTION-COMPENSATED IMAGE SIGNAL INTERPOLATION USING A WEIGHTED MEDIAN FILTER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO.	\$1510	\$300	\$0	\$1810	05/17/2011

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROGERS, SCOTT A	2625	375-2401.20

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1.....DLA.Piper.LLP.(US).....
<input checked="" type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2.....
<input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" indication form PTO/SB/47, Rev. 03-02 or more recent) attached. Use of a Customer Number is required.		3.....

### 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Trident Microsystems (Far East) Ltd.

Grand Cayman, Cayman Islands, B.W.I.

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:	4b. Payment of Fee(s) (Please first reapply any previously paid issue fee shown above)
<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> A check is enclosed.
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<input type="checkbox"/> Advance Order - # of Copies _____	<input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date ..... May 17, 2011 .....

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Registration No. .... 35255 .....

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